holders, so staff can carry these as an aide-memoir. We have also developed a two minute promotional video, illustrating its purpose. The Hospital Research, Development and Innovation Team have also been supporting its development. The Chief Hospital Nurse is excited about its simplicity and potential impact across the Trust. Its effectiveness is currently being evaluated. Interestingly, our Head of Human Resources at the hospice is interested in using it as a model to assist managers in having challenging conversations with staff. SPACE is for all, there is always room for improvement, however experienced we are.

P-22 SHARING THE RESPONSIBILITY, GROWING THE VOICE: BUILDING TRUST AND DIVERSITY ON TWITTER

James Bloomfield, Tara Schrikker. *St Wilfrid's Hospice, Eastbourne, UK*

10.1136/bmjspcare-2018-hospiceabs.47

Background Initial feedback from staff and volunteers indicated they wished to have their voices heard. Sharing the responsibility between all team members for communicating the message of hospice care appeared to be a new initiative to be explored. We predicted that opening up communication platforms to new perspectives would provide an insight into hospice care to local individuals and groups.

Aims To support the idea of a digital transformation within the hospice and encourage staff and volunteer participation. To encourage team members to collaborate in hospice communications, share their experiences directly and to participate in online conversations with external stakeholders.

Method Following face-to-face feedback from staff and collection of anecdotal evidence, we determined that staff and volunteers felt under-represented online and they wished to bust myths around their roles directly. We utilised short workshops to train staff and reduce barriers to entry for platforms, including 1–2–1 sessions. We tracked our success using Google Analytics and Twitter Analytics and gathered case studies, oral and written feedback from team members.

Results In 2016–2018 we grew Twitter followers around our whole team by 459% (2,207 to 12,298). In a year our retail team added 1800 followers on Twitter from 0 followers in 2017. In two years we added 70% more followers to our main account.

Conclusion This initiative demonstrates that sharing individual experiences is a contributing factor to recognising the importance of digital platforms within hospices for improving efficiency and transparency throughout the organisation. This approach lightened the burden in terms of finances and time for the Communications team while boosting frequency and variety of stories reported from diverse sources. It was an innovative way to maximise limited resources and build a digital culture within the hospice.

P-23 THE OPEN SCRAPBOOK – YOUNG VOLUNTEERS IMPROVING PRACTICE THROUGH PROJECT WORK

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10.1136/bmjspcare-2018-hospiceabs.48

Background 16–23 year olds on a clinical volunteer programme at the hospice in the evenings presented an

opportunity to provide meaningful, bespoke activities for patients on the inpatient Unit (IPU) as well as maximising the volunteers' contribution.

Aims

- Improve wellbeing for patients on the IPU by providing narrative based activity
- Young volunteers at the start of their clinical career to understand importance of compassionate care and value of storytelling in palliative care.

Methods

- February 2018: five volunteers attended a training session to explore the benefits of company, conversation and storytelling for patients (Patel, 2016).
- Volunteers completed project work resulting in an A3 template called The Open Scrapbook; a tool for volunteers to work through with patients to creatively collate information and communicate what is special to them.
- April 2018: a new group of nine young volunteers have continued work on the open scrapbook and following a further training session, project has commenced.

Results Completion of the open scrapbook with volunteers provides meaningful activity as well as being a cathartic and enjoyable process for patients by reflecting on memories and the opportunity to tell stories about their lives and what matters to them. Open Scrapbooks are visible in patients' bedrooms so that they can continue to be added to and enable clinical and non-clinical teams to get to know important information to support their work. Open scrapbooks serve as a keepsake for patients and families to take home.

Conclusion The Open Scrapbook initiative acknowledges the impact of narrative-based activities at end of life as an important component when addressing 'total pain' (Stanworth, 2004). Young volunteers involved in the project to begin their medical careers feeling confident with talking about death, dying and loss and understand the value of storytelling in medicine and healthcare.

P-24 AS SEEN ON TV – ENABLING PATIENTS AND FAMILIES TO HAVE A VOICE

Angela Cooke. *ellenor, Kent, UK*

10.1136/bmjspcare-2018-hospiceabs.49

Background Hospice care is not well understood leading to fear and taboo about planning for end of life. This fear limits ability of people to fully live until they die. To challenge preconceived views the hospice accepted an invitation to film a TV documentary enabling people to gain wider understanding of the range of hospice support. Patients and families at the end of life can feel disempowered and the importance of having a voice becomes even more powerful (Watts, 2018).

Aims To enable the stories and experiences of patients and families to be heard and shared. To raise public awareness of the range and impact of hospice services.

Methods An observation documentary model (Nichols, 2001) was used, with an identified Clinical Lead, working closely with the clinical staff and the TV crew. Careful planning was essential ensuring the range and breadth of hospice care was recorded, highlighting hospice beyond the walls. Posters were

displayed alerting patients and families. Patients were invited to participate by their key worker. Full explanation was given to participants, with consent obtained prior to filming. Patients without capacity were excluded but their relatives included. The Clinical Lead had increased visible presence during the 13 weeks filming across clinical areas ensuring equal access to patient stories.

Results Some clinical staff were reticent, acting as gatekeepers, impacting on opportunities for patients and families, addressed by Clinical Lead's presence. A surprising number of families showed a willingness to talk at intense critical moments in their journey.

Families have valued the lasting legacy this has provided.

'If filming highlighted to others what services are provided I feel it has been of benefit' (Patient)

Conclusions Patients and families value telling their stories and feeling heard. Barriers to participation of patient involvement have reduced as clinical awareness of therapeutic benefits has grown.

P-25 FIVE MINUTES OF FAME: THE PSYCHOSOCIAL IMPACT OF MAKING A TELEVISION DOCUMENTARY

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10.1136/bmjspcare-2018-hospiceabs.50

Background Between January and April 2018, a television production company began filming a 13-week documentary exploring hospice care which aired from May 2018.

Aims During filming – explore the impact of film crew on patient/family experiences. During broadcast – support participants featured in the documentary, ensuring the safety and follow-up of patients and bereaved families.

Methods Patients, carers, staff and volunteers from a selected hospice were approached about filming and offered an opportunity to tell their story. In addition, disclaimers were placed around the hospice with full explanation of the process. Contact details of all featured in the documentary were collected throughout the filming process. Our Communications Team had some editorial control reviewing each draft episode, creating a working plan of patients and families featured, enabling individuals to be contacted prior to broadcast of their particular episode. Bereaved families were invited in for a private screening of their episode five days prior to broadcast.

Results Film crews were sensitive when approaching patients and did so with full consent. All patients and families who consented were keen to tell their story and play a part in the documentary. However, occasionally there was a sense that the presence of cameras changed the nature of the interaction with patients and their relatives. Occasionally, this meant scenarios were 'staged' with some conversations needing to be repeated. For patients filmed during the documentary who subsequently died, families were grateful for forewarning of the broadcast. Most families declined the offer of private screening, although many stated they would record the episode to watch later. Private screenings enabled staff to pick up bereavement risks resulting in onward referral to counselling services.

Conclusion Filming in the hospice environment needs to be handled extremely carefully and sensitively with great consideration and support given to families whose loved ones subsequently die.

P-26 THE SWAN SONG PROJECT

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10.1136/bmjspcare-2018-hospiceabs.51

The Swan Song Project gives people dealing with end of life and bereavement the opportunity to write and record an original song. A professional songwriter helps every step of the way, the songs are then recorded and participants have the option of keeping them private or sharing them on the project website. Beginning at Marie Curie Hospice Bradford in May 2017 the project has been incredibly powerful in many ways. This presentation will detail the different ways people have engaged with the project and the impact it has made. The song-writing process can be greatly therapeutic as many participants have reported. Some have used the opportunity to communicate beautiful messages to their loved ones which may have been difficult to do face-to-face, some have reflected on their lives and found new perspectives on their value and identity and some have left messages for their children or grandchildren to grow up with. These songs are in the control of the participants and focus on who they are and what they want to say in a time when a lot may be out of their control and focusing on their conditions. The project also works with friends and family dealing with bereavement. The songs can then live on with them for many years to come as a part of their loved ones' legacy.

In this presentation, Project Facilitator Ben Buddy Slack and Lead Nurse at Marie Curie Bradford, Nicky Denbow, will share stories and feedback on the project so far and the impact it has made on participants, their loved ones, the hospice and the wider public. We all lose people and we all connect with music in some way and this project has moved the hearts of many and it is continuing to develop and expand.

P-27 WHAT MATTERS AT THE END OF LIFE? RESULTS FROM COMMUNITY LISTENING EVENTS ON THE ISLE OF MAN

Giovanna Cruz, Anne Mills, Lottie Morris, Hollie Quayle, Brenda Dougherty, Lonan Oldam, Sarah McGhee. *Hospice Isle of Man, Strang, Isle of Man*

10.1136/bmjspcare-2018-hospiceabs.52

Background Hospice Isle of Man (IoM) is celebrating its 35th anniversary. To thank the community and to inform the next five-year strategy, the hospice conducted a series of community listening events with the theme of 'What matters to you, matters to us'.

Aims To understand what the public knew about Hospice and learn about their experience; to find out what matters most when confronted with end of life; and to ask how the hospice can best serve the IoM.

Methods Hospice staff approached members of the public at supermarkets and community events at seven locations. Events took place between January and February 2018 during business hours. Demographic data were collected on age and sex. Interviewers recorded responses that were analysed using thematic analysis according to the aims.

Results A total of 278 persons from a population of 83 000 provided comments. The majority were female (63%) and over 55 (68%), 32% had used services, and 74% had general awareness of hospice. Respondents were aware of specialist